# UNITED STATES U.S. SECURITIES AND EXCHANGE COMMISSION Workington D.C. 20540

Washington, D.C. 20549



## FORM D

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

125/412
OMB APPROVAL
OMB Number 3235-0076
Expires: December 31, 1996
Estimated average burden
hours per response:16.00
SEC USE ONLY
Prefix Serial
DATE RECEIVED

Name of Offering ( check if this is an amendment and name has changed, and inc	dicate change.)
Digital Fuel Technologies Inc. Series C Preferred Stock Financing	Section of the sectio
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule	506 Section 4(6) ULOE
Type of Filing: New Filing Amendment	( AUF 2 2 2003 )
A. BASIC IDENTIFICAT	
Enter the information requested about the issuer	
Name of Issuer ( check if this is an amendment and name has changed, and inc	dicate change.)
Digital Fuel Technologies Inc.	
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
951 Mariner's Island Blvd., Suite 665, San Mateo, CA 94404	(650) 524-2520
Address of Principal Business Operations (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
(if different from Executive Offices)	
same as above	same as above
Brief Description of Business	BBA AFAAFB
Service relationship management software development	PROCESSEU
Type of Business Organization	
☐ corporation ☐ limited partnership, already formed	other (please specify): AUG 25 2003
☐ business trust ☐ limited partnership, to be formed	)
Month Year	THOMSON FINANCIAL
Actual or Estimated Date of Incorporation or Organization:        0     3	Actual Estimated
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service ab	
CN for Canada: FN for other foreign in	risdiction) DF.

#### GENERAL INSTRUCTIONS

#### Federal

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only reported the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

#### State

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

#### **ATTENTION**

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

		A. BASIC IDE	NTIFICATION DATA						
2. Enter the information requ	ested for the foll								
•		uer has been organized wit	thin the past five years;						
<ul> <li>Each beneficial owner of the issuer;</li> </ul>									
Each executive office	er and director of	corporate issuers and of c	orporate general and mana	ging partners of p	artnership issuers; and				
Each general and man			. 3		•				
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	□ Director     □ Director	General and/or				
					Managing Partner				
Full Name (Last name first, if in	ndividual)								
Lehmann, Benny					······				
Business or Residence Address		(Number and Street, City	•						
c/o Digital Fuel Technologies									
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	☐ Director	General and/or Managing Partner				
Full Name (Last name first, if in	ndividual)								
Dancziger, Yisrael									
Business or Residence Address		(Number and Street, City	y, State, Zip Code)						
c/o Digital Fuel Technologies	Inc., 951 Marin	er's Island Blvd., Suite 6	65, San Mateo, CA 94404	<b>!</b>					
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	Executive Officer	☑ Director	General and/or Managing Partner				
Full Name (Last name first, if in	ndividual)		· · · · · · · · · · · · · · · · · · ·	·					
Bott, Ross									
Business or Residence Address		(Number and Street, City	y, State, Zip Code)						
c/o Digital Fuel Technologies	Inc., 951 Marin	er's Island Blvd., Suite 6	65, San Mateo, CA 94404	ļ					
Check Box(es) that Apply:	Promoter	Beneficial Owner	☐ Executive Officer	□ Director	General and/or Managing Partner				
Full Name (Last name first, if ir	ndividual)								
Campbell, Michael									
Business or Residence Address		(Number and Street, City	y, State, Zip Code)						
c/o Digital Fuel Technologies	Inc., 951 Marin	er's Island Blvd., Suite 6	65, San Mateo, CA 94404	<b>I</b>					
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	□ Director	General and/or Managing Partner				
Full Name (Last name first, if in	ndividual)		-						
Eisenberg, Michael									
Business or Residence Address		(Number and Street, City	y, State, Zip Code)						
c/o Digital Fuel Technologies	Inc., 951 Marin	er's Island Blvd., Suite 6	65, San Mateo, CA 94404	<b>.</b>					
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	□ Director	General and/or Managing Partner				
Full Name (Last name first, if ir	ndividual)								
Kremer, Mark	•								
Business or Residence Address		(Number and Street, City	y, State, Zip Code)						
c/o Benchmark Capital, 2480	Sand Hill Road	, Suite 200, Menlo Park,	CA 94025						
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	General and/or Managing Partner				
Full Name (Last name first, if ir	ndividual)			<del></del>					
Solvik, Peter	( )								
Business or Residence Address		(Number and Street, City	y, State, Zip Code)						
c/o Sigma Partners, 1600 El C	Camino Real, Su								

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	A. BASIC IDE	NTIFICATION DATA		
2. Enter the information requested for the f	following:			
• Each promoter of the issuer, if the i	ssuer has been organized wi	thin the past five years;		
<ul> <li>Each beneficial owner having the p of the issuer;</li> </ul>	ower to vote or dispose, or d	irect the vote or disposition	n of, 10% or more	of a class of equity securities
<ul> <li>Each executive officer and director</li> </ul>	of corporate issuers and of o	corporate general and mana	aging partners of p	partnership issuers; and
<ul> <li>Each general and managing partner</li> </ul>	of partnership issuers.			
Check Box(es) that Apply:  Promoter	Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individual) BCPI I, L.P.				
Business or Residence Address	(Number and Street, Cit	y, State, Zip Code)		
c/o Benchmark Capital, 2480 Sand Hill Ro	ad, Suite 200, Menlo Park,	CA 94025	·-··-	
Check Box(es) that Apply: Promoter	☐ Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individual)  Israel Seed IV, LP			2000	
Business or Residence Address	(Number and Street, Cit	y, State, Zip Code)		
Box 309, Queensgate House, South Church	*	• • •	ls	
Check Box(es) that Apply: Promoter	Beneficial Owner	Executive Officer	☐ Director	General and/or Managing Partner
Full Name (Last name first, if individual)				
Kogan, Yakov				
Business or Residence Address	(Number and Street, Cit	y, State, Zip Code)		
c/o Digital Fuel Technologies Ltd., 11 Kiry	at Hamada Street, Beit An	ot, Floor #2, Har Hotzvi	m, Jerusalem, Isi	rael
Check Box(es) that Apply: Promoter	⊠ Beneficial Owner	☐ Executive Officer	☐ Director	General and/or Managing Partner
Full Name (Last name first, if individual)				
Raz, Gilad				
Business or Residence Address	(Number and Street, Cit	y, State, Zip Code)		
c/o Digital Fuel Technologies Ltd., 11 Kiry		iot, Floor #2, Har Hotzvi		rael
Check Box(es) that Apply:  Promoter	Beneficial Owner	Executive Officer	☐ Director	General and/or Managing Partner
Full Name (Last name first, if individual)				
Sigma Partners 6, L.P.				
Business or Residence Address	(Number and Street, Cit	•		
c/o Sigma Partners, 1600 El Camino Real,				
Check Box(es) that Apply:  Promoter	Beneficial Owner	Executive Officer	☐ Director	General and/or Managing Partner
Full Name (Last name first, if individual)				
TLD Holdings Ltd.				
Business or Residence Address	(Number and Street, Cit	• •		
c/o Morning Star Holdings Ltd., PO Box 55	56, Main Street, Charlesto	wn, Nevis, British West I	ndies	

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Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?	B. INFORMATION ABOUT OFFERING	
3. Does the offering permit joint ownership of a single unit?  4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed as associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer in frome than five (b) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.  Full Name (Last name first, if individual)  N/A  Business or Residence Address  (Number and Street, City, State, Zip Code)  States in Which Person Listed Has Solicited or Intends to Solicit Purchasers  (Check "All States" or check individual States)  (Check "All States" or check individual States)  (AL ] (AK ] (AZ ] (AR ] (CA ] (CO ] (CT ] (DE ] (DC ) (FL ] (GA ] (HI ] (ID ) (	-	
3. Does the offering permit joint ownership of a single unit?  4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed as associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. In fine of that broker or dealer ronly.  Full Name (Last name first, if individual)  N/A  Business or Residence Address  (Number and Street, City, State, Zip Code)  States in Which Person Listed Has Solicited or Intends to Solicit Purchasers  (Check "All States" or check individual States)	2. What is the minimum investment that will be accepted from any individual?	\$ <u>N/A</u>
4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.  Full Name (Last name first, if individual)  N/A  Business or Residence Address  (Number and Street, City, State, Zip Code)  States in Which Person Listed Has Solicited or Intends to Solicit Purchasers  (Check *All States* or check individual States).  [AL] [AK] [AZ] [AR] [CA] [CO] [CT] [DE] [DC] [FL] [GA] [HI] [ID]  [IL] [RN] [A] [AZ] [AR] [NJ] [NM] [NN] [NN] [NG] [ND] [MA] [MI] [MN] [MS] [MO]  [MT] [NE] [NV] [NH] [NJ] [NM] [NY] [NG] [ND] [MA] [MI] [MN] [MS] [MO]  [Full Name (Last name first, if individual)  Business or Residence Address  (Number and Street, City, State, Zip Code)  States in Which Person Listed Has Solicited or Intends to Solicit Purchasers  (Check *All States* or check individual States).  [AL] [AK] [AZ] [AR] [CA] [CO] [CT] [DE] [DC] [FL] [GA] [HI] [ID]  Full Name of Associated Broker or Dealer  States in Which Person Listed Has Solicited or Intends to Solicit Purchasers  (Check *All States* or check individual States).  [AL] [AK] [AZ] [AR] [CA] [CO] [CT] [DE] [DC] [FL] [GA] [HI] [ID]  [IL] [IN] [IA] [NS] [NN] [NN] [NN] [NN] [NN] [NN] [NN		Yes No
or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person a gate of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.  Full Name (Last name first, if individual)  N/A  Business or Residence Address  (Number and Street, City, State, Zip Code)  States in Which Person Listed Has Solicited or Intends to Solicit Purchasers  (Check "All States" or check individual States)		
Name of Associated Broker or Dealer   States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Number and Street, City, State, Zip Code)   CT   CD   CT   CT	or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may	
Business or Residence Address   (Number and Street, City, State, Zip Code)		
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers   (Check "All States" or check individual States)		
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RI SC SD TN TX UT VA WA WA WA WY WI WY PR Full Name (Last name first, if individual)  Business or Residence Address (Number and Street, City, State, Zip Code)  Name of Associated Broker or Dealer  States in Which Person Listed Has Solicited or Intends to Solicit Purchasers  (Check "All States" or check individual States)		
Business or Residence Address (Number and Street, City, State, Zip Code)  Name of Associated Broker or Dealer  States in Which Person Listed Has Solicited or Intends to Solicit Purchasers  (Check "All States" or check individual States)		
Name of Associated Broker or Dealer  States in Which Person Listed Has Solicited or Intends to Solicit Purchasers  (Check "All States" or check individual States)		<del>-</del>
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(Check "All States" or check individual States)       All States         [AL] [AK] [AZ] [AR] [CA] [CO] [CT] [DE] [DC] [FL] [GA] [HI] [ID]         [IL] [IN] [IA] [KS] [KY] [LA] [ME] [MD] [MA] [MI] [MN] [MS] [MO]         [MT] [NE] [NV] [NH] [NJ] [NM] [NY] [NC] [ND] [OH] [OK] [OR] [PA]         [RI] [SC] [SD] [TN] [TX] [UT] [VT] [VA] [WA] [WV] [WI] [WY] [PR]         Full Name (Last name first, if individual)	Name of Associated Broker or Dealer	
[ AL ] [ AK ] [ AZ ] [ AR ] [ CA ] [ CO ] [ CT ] [ DE ] [ DC ] [ FL ] [ GA ] [ HI ] [ ID ] [ IL ] [ IN ] [ IA ] [ KS ] [ KY ] [ LA ] [ ME ] [ MD ] [ MA ] [ MI ] [ MN ] [ MS ] [ MO ] [ MT ] [ NE ] [ NV ] [ NH ] [ NJ ] [ NM ] [ NY ] [ NC ] [ ND ] [ OH ] [ OK ] [ OR ] [ PA ] [ RI ] [ SC ] [ SD ] [ TN ] [ TX ] [ UT ] [ VT ] [ VA ] [ WA ] [ WV ] [ WI ] [ WY ] [ PR ]    Business or Residence Address (Number and Street, City, State, Zip Code)	States in Which Person Listed Has Solicited or Intends to Solicit Purchasers	
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Full Name (Last name first, if individual)  Business or Residence Address (Number and Street, City, State, Zip Code)		
Name of Associated Broker or Dealer	Business or Residence Address (Number and Street, City, State, Zip Code)	
	Name of Associated Broker or Dealer	
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers	States in Which Person Listed Has Solicited or Intends to Solicit Purchasers	- Marie - Mari
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TILITIM LATERS TREE LATER METERIO MATERIA MILITARE MOTORIA		
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(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USI	E OF PROCEED	S	
1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \( \subseteq \) and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.			
	Time of Sequents	Aggregate Offering Pric	P	Amount Already Sold
	Type of Security  Debt	\$0	•	\$ 0
	Equity	\$7,999,999.9	`	\$7,999,999.99
	Equity	\$ <u>7,999,999.99</u>	<u> </u>	\$ <u>/,999,999.99</u>
	☐ Common ☒ Preferred			
	Convertible Securities (including warrants)	\$0		\$0
	Partnership Interests	\$0		\$0
	Other (Specify)	\$0		\$0
	Total	\$ <u>7,999,999.9</u>	9	\$ <u>7,999,999.99</u>
	Answer also in Appendix, Column 3, if filing under ULOE.			
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offering under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."			
				Aggregate
		Number Investors		Dollar Amount of Purchases
	Accredited Investors	8		\$7,999,999.99
	Non-accredited Investors	0		\$0
	Total (for filings under Rule 504 only)	_		\$
	Answer also in Appendix, Column 4, if filing under ULOE.	_		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of the securities in this offering. Classify securities by type listed in Part C – Question 1.			
	Time of offsuing	Type of Security		Dollar Amount Sold
	Type of offering	Security		
	Rule 505			\$
	Regulation A	<del></del>		\$
	Rule 504			\$
	Total			\$
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.			
	Transfer Agent's Fees			\$
	Printing and Engraving Costs			\$
	Legal Fees		$\boxtimes$	\$145,000.00
	Accounting Fees			\$
	Engineering Fees			\$
	Sales Commissions (specify finders' fees separately)			\$
	Other Expenses (identify)			\$
	Total		— ⊠	\$145,000.00

b. Enter the difference between the aggregate offering price given in response to Part C - Question 1 and total expenses furnished in response to Part C - Question 4.a. This difference is the "adjusted gross proceeds to the issuer."	\$ <u>7,854,999.99</u>
5. Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth set forth in response to Part C - Question 4.b above.	
Di	nts to Officers, Payments to rectors, & Others Affiliates
Salaries and fees	\$
Purchase of real estate	\$
Purchase, rental or leasing and installation of machinery and equipment	\$
Construction or leasing of plant buildings and facilities	\$
Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)	□ \$
· -	
-	
Other (specify):	
	П \$
Total Payments Listed (column totals added)	□ \$7,854,999.99
Total Faymonts Listed (continui totals added)	<u>97,034,222.72</u>
D. FEDERAL SIGNATURE	
	A. D. L. SOS et al. C. N
The issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is filed unconstitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commission, upon written requisissuer to any non-accredited investor pursuant to paragraph (b)(2) of Rule 502.	est of its staff, the information furnished by the
Issuer (Print or Type) Sign	
Digital Fuel Technologies Inc.	st <u>15</u> , 2003
Name of Signer (Print or Type) Title of Signer (Print or Type)	
Ralph L. Arnheim III Secretary	
ATTENTION	
Intentional misstatements or omissions of fact constitute federal criminal violat	ions, (See 18 U.S.C. 1001.)

BY032120.081 6 of 9 SEC 1972 (1/94)

		E. STATE SIGNAT	TURE		
1.	Is any party described in 17 CFR 230 of such rule?	252(c), (d), (e) or (f) presently subject to a	ny of the disqualification provisions	Yes	No ⊠
		See Appendix, Column 5, for	state response.		
2.	The undersigned issuer hereby undertageness 239.500) at such times as required by	•	any state in which this notice is filed, a notice	e on Form l	D (17 CFR
3.	The undersigned issuer hereby underta	akes to furnish to the state administrators, u	pon written request, information furnished by	y the issuer	to offerees.
4.	ě ,	ich this notice is filed and understands that	nat must be satisfied to be entitled to the Unit the issuer claiming the availability of this ex-		
	e issuer has read this notification and kn horized person.	ows the contents to be true and has duly ca	used this notice to be signed on its behalf by	the undersig	ned duly
lssu	er (Print or Type)	Signature	Date		
Dig	ital Fuel Technologies Inc.	Yen	August 15, 2003		
	ne (Print or Type)	Title (Print or Type)		-	
Ra	lnh I Arnheim III	Secretary			

#### Instruction.

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

### APPENDIX

1	2 3									
	to non-a	to sell ccredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)	Type of investor and explanation of amount purchased in State waiver granted)		te ULOE attach ation of granted)				
State	Yes	No	Series C Preferred Stock	Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount	Yes	No	
AL						· · · · · · · · · · · · · · · · · · ·		_		
AK										
ΑZ										
AR										
CA		No	\$6,599,999.62	4	\$6,599,999.62	0	0		No	
со										
СТ										
DE										
DC										
FL										
GA										
ні										
ID										
IL										
IN										
IA										
KS										
KY			,							
LA										
ME										
MD										
MA										
MI										
MN										
MS										
МО										
MT										
NE										

## APPENDIX

1	2 3			3 4					5
	to non-a	d to sell accredited rs in State 3-Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of invo amount purcha (Part C-I	sed in State tem 2)		Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)	
State	Yes	No	Series C Preferred Stock	Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount	Yes	No
NV									
NH									
NJ									
NM								· · · · · · · · · · · · · · · · · · ·	
NY		No	\$34,713.37	1	\$34,713.37	0	0		No
NC									
ND									
ОН									
OK									
OR									
PA									
Rì									
SC									
SD									
TN									
TX									
UT									
VT		ļ							ļ
VA							<u> </u>		
WA		ļ							
WV									
Wı									
WY									
PR									